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CONFIRMATION NO. 6259

Bib Data Sheet

SERIAL NUMBER 10/700,795	FILING OR 371(c) DATE 09/28/2004 RULE	CLASS 623	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. ENDOV-65897
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** CONTINUING DATA *****

This application is a CON of 09/864,822 05/22/2001 PAT 6,663,666 and is a CON of 09/864,285
~~05/26/2001 PAT 6,668,337~~
 which is a CON of 09/484,285 01/18/2000 PAT 6,235,050
 which is a CON of 08/996,330 12/22/1997 PAT 6,039,758
 which is a CON of 08/707,179 09/03/1996 PAT 5,824,044
 which is a CIP of 08/241,476 05/12/1994 PAT 5,628,783
 (*)Data provided by applicant is not consistent with PTO records.

[Signature] 5/22/06

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/03/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 19	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i> <i>Initials</i>				
Verified and Acknowledged	<i>Joseph Davis</i> Examiner's Signature				

ADDRESS

24201

TITLE

Bifurcated multicapsule intraluminal grafting system and method

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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